

The Primary Care Workforce: What We Know and How an Investment Would Help

PRIMARY CARE WORKGROUP NOVEMBER 10, 2022



Agenda

Current Supply

▶ Workforce Pipeline

▶ Reimbursement

▶ Future Needs



Current Primary Care Workforce – Its Complicated

- Data Sources
 - Maryland Board of Physicians Licensure/ Renewal Data
 - National Plan and Provider Enumeration System includes all providers that may bill
 - AMA Physician Masterfile
 - Limitations timeliness and practice location specificity
- Definitional Issues
 - Head count vs full-time equivalent (FTE)
 - Percent of time engaged in patient care
 - Specialty identification
- Traditional primary care family medicine, general internal medicine, pediatrics, geriatrics



Two National Workforce – Head Count Estimates

AMA Physician Master File	MD	MD Rank	State
			Median
Total Number of Physicians	23,791		
Total Number of Primary Care Physicians	7,075		
Active Physicians per 100,000 Population, 2020	394	2	272
Total Active Patient Care Physicians per 100,000 Population, 2020	309	6	240
Active Primary Care Physicians per 100,000 Population, 2020	117	7	96
Active Patient Care Primary Care Physicians per 100,000 Population, 2020	98	9	85
National Plan and Provider Enumeration System (NPPES)			National Avg
Total Number of Physicians	22,980		
Primary Medical	9,793		
Physicians per 100,000 Population,	379	8	317
Primary Medical Physicians per 100,000 Population	162	16	142

Notes:

- 1. Primary care includes internal medicine, family medicine, geriatric medicine, pediatrics
- 2. AMA Physician Master File includes physicians that worked a minimum of 20 hours; active patient care includes physicians in direct patient care
- 3. NPPES counts all physicians with an NPI, Primary medical includes internal medicine, family medicine, geriatric medicine, and pediatrics



Improvement in Estimating Supply

- Convert head count workforce into FTEs; typically reduces counts of physicians by about 10 percent
- Considerations what is full time
- Changing lifestyle preferences of the physician workforce
- ▶ MHCC's recent workforce counts relied on conversion of head counts to FTEs



Demand for Primary Care Services

- Basic estimates use national averages or State medians to assess adequacy of physician workforce
- Current demand side estimates account for disease burden and age of the population and availability of new delivery models
- Increasing interest in accounting for social determinants and health equity
- Assume underserved population used health care in a pattern like that used by middle class population



Maryland Medical School Pipeline

- Johns Hopkins University (JHU)
- University of Maryland (UMD)
- Uniformed Services University of the Health Sciences (USUHS)
- In-state retention of medical school graduates varies from ~ 37% at UMD, 14% at JHU, 9% at USUHS
- On the horizon: proposed Schools of Osteopathic Medicine
 - Morgan State University (Board of Public Works approved construction costs)
 - Meritus Health System
- Both proposed schools plan to recruit minority and rural applicants serving diverse communities and rural Maryland



Residency Programs - 2022

Health System	Maryland Region	Estimated number of medical students matching in Maryland in 2022	Estimated number of medical students matching in Maryland primary care in 2022
Anne Arundel Medical Center	Baltimore Area	22	15
Greater Baltimore Medical Center	Baltimore Area	17	13
Johns Hopkins Bayview Medical Center	Baltimore Area	23	16
Johns Hopkins Hospital	Baltimore Area	228	64
Kaiser Permanente Mid Atlantic	Western Maryland	6	6
MedStar Franklin Square Medical Center	Baltimore Area	9	8
MedStar Good Samaritan Hospital	Baltimore Area	9	9
Mercy Medical Center	Baltimore Area	18	12
MedStar Union Memorial Hospital	Baltimore Area	71	44
Sheppard & Enoch Pratt Hospital	Baltimore Area	5	0
Sinai Hospital of Baltimore	Baltimore Area	47	20
St. Agnes Hospital	Baltimore Area	25	14
TidalHealth	Eastern Shore	10	10
University of Maryland Capital Region Medical Center	DC Metro	12	12
University of Maryland Medical Center	Baltimore Area	168	55
University of Maryland Mid-town Campus	Baltimore Area	19	15
Total		689	313

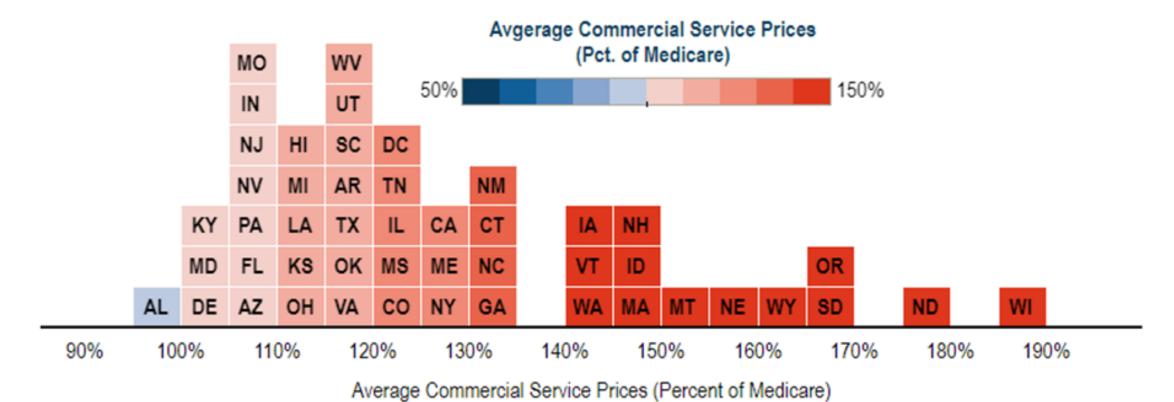


Growth in Number of Residents and Retention Levels for Training Programs

	Maryland	Rank	State Median
Percent Change in Residents and Fellows in ACGME-Accredited Programs, 2010-2020	5.2%	48	24.4%
Percentage of Physicians Retained in State from Undergraduate Medical Education (UME), 2020	21.6%	40	39.7%
Percentage of Physicians Retained in State from Graduate Medical Education (GME), 2020	37.6%	43	45.1%
Percentage of Physicians Retained in State from UME and GME Combined, 2020	52.6%	43	69.7%

Average Nationwide Private Physician Payment Rates, 2017



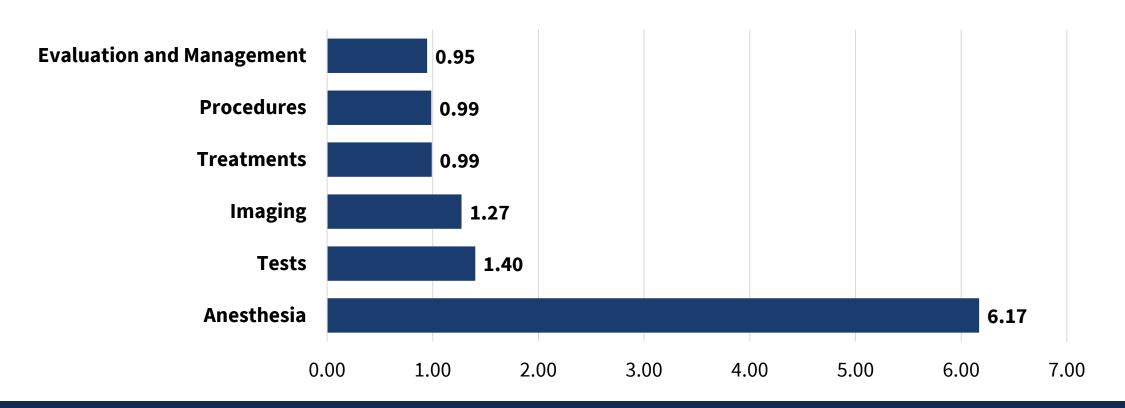


Source: Health Care Cost Institute, <u>healthcostinstitute.org/hcci-research/comparing-commercial-and-medicare-professional-service-prices</u>

Average Private Pay Fee as a Percent of Medicare Fees

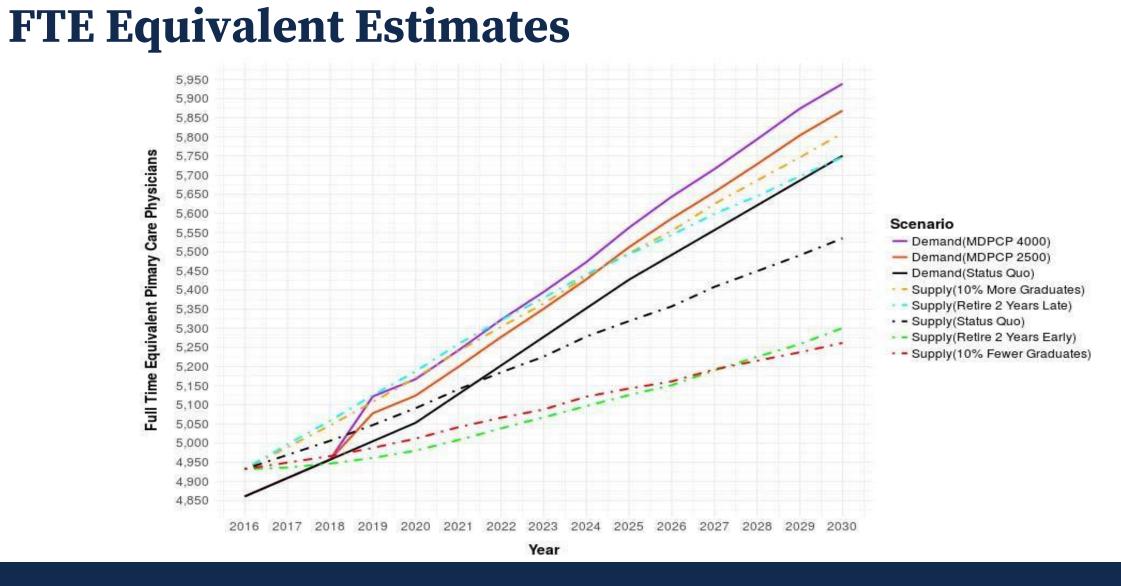


Maryland private rates were about ~104% of Medicare



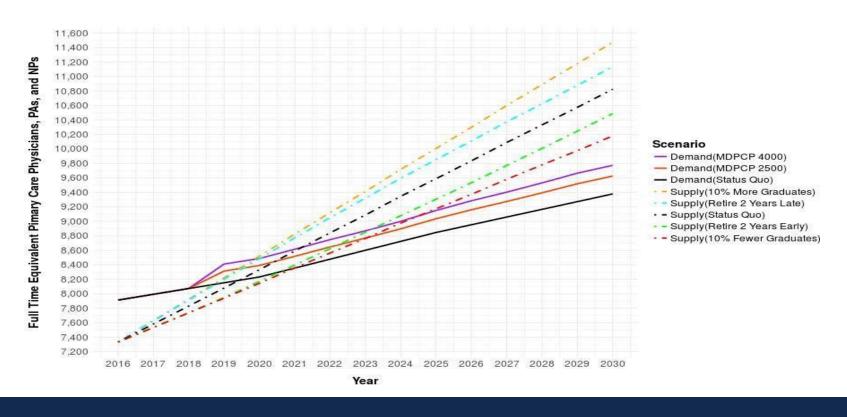
Primary Care Physician Projections -2018-2030







Future Needs -- Primary Care Physician, Nurse Practitioner, and Physician Assistant Projections 2018-2030





Observations

- ▶ Physician head counts put Maryland above the national average 20 percent higher
- Head counts don't take into account changing preferences of the physician workforce or demand
- Demand side methodologies are growing in sophistication; viewed using these methodologies, Maryland physician supply is more consistent with the national average
- State will depend on out-of-state medical education programs to meet work force needs; limited growth in existing UME and GME, but new medical schools may eventually help
- In primary care, use of non-physician health care practitioners will increase; can't ignore non-physician practitioners as Maryland considers primary care investment

The End

